

**Maryland Board of Pharmacy
Public Board Meeting**

**Agenda
April 21, 2021**

Name	Title	Present	Absent
Bouyoukas, E	Commissioner		
Evans, K.	Commissioner		
Fink, K.	Commissioner		
Hardesty, J.	Commissioner/Treasurer		
Geigher, P.	Commissioner		
Leikach, N.	Commissioner		
Morgan, K.	Commissioner/President		
Oliver, B	Commissioner		
Rusinko, K.	Commissioner/Secretary		
Singal, S.	Commissioner		
Vasquez, J.	Commissioner		
Yankellow, E.	Commissioner		
Bethman, L.	Board Counsel		
Felter, B.	Board Counsel		
Speights-Napata, D.	Executive Director		
Fields, E.	Deputy Director /Operations		
James, D.	Licensing Manager		
Leak, T.	Compliance Director		
Chew, C.	Enforcement Compliance Auditor		

Subject	Responsible Party	Discussion	Action Due Date (Assigned To)
I. Executive Committee Report(s)	A.) K. Morgan, Board President 		

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		<table><tr><td>Distributor</td><td>8</td><td>101</td><td>0</td><td>1,454</td></tr><tr><td>Pharmacy</td><td>16</td><td>0</td><td>0</td><td>2,131</td></tr><tr><td>Pharmacist</td><td>40</td><td>547</td><td>0</td><td>13,213</td></tr><tr><td>Vaccination</td><td>64</td><td>194</td><td>0</td><td>5,511</td></tr><tr><td>Pharmacy Intern - Graduate</td><td>4</td><td>0</td><td>0</td><td>61</td></tr><tr><td>Pharmacy Intern - Student</td><td>8</td><td>12</td><td>0</td><td>795</td></tr><tr><td>Pharmacy Technician</td><td>151</td><td>310</td><td>1</td><td>11,321</td></tr><tr><td>Pharmacy Technician-Student</td><td>1</td><td>0</td><td>0</td><td>66</td></tr><tr><td>TOTAL</td><td>292</td><td>1,164</td><td>1</td><td>34,552</td></tr></table>	Distributor	8	101	0	1,454	Pharmacy	16	0	0	2,131	Pharmacist	40	547	0	13,213	Vaccination	64	194	0	5,511	Pharmacy Intern - Graduate	4	0	0	61	Pharmacy Intern - Student	8	12	0	795	Pharmacy Technician	151	310	1	11,321	Pharmacy Technician-Student	1	0	0	66	TOTAL	292	1,164	1	34,552	
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E. Compliance	T. Leak, Compliance Director	<div>1. Unit Updates</div> <div>2. Monthly Statistics</div> <div>Complaints & Investigations:</div> <div>New Complaints – 13</div> <div><div>• Customer Service – 1</div><div>• Medication Error - 1</div></div>																																														

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		<ul style="list-style-type: none"> • Employee Pilferage – 2 • Unprofessional Conduct – 4 • Dispensing Error – 2 • Refusal to Fill - 1 • Inspection Issues – 2 <p>Resolved (Including Carryover) – 14 Actions within Goal – 11/14 Final disciplinary actions taken – 0 Summary Actions Taken – 0 Average days to complete – 0</p> <p>Inspections: Total - #164</p> <p>Annual Inspections - #19 (#1 Community #14 Sterile #4 Distributor) (Regulatory #19 + COVID Administration Site Inspections #90 Narcotic Audit Follow Ups #45)</p> <p>Opening Inspections - #7 Closing Inspections - #3 Relocation/Change of Ownership Inspections - #0 Board Special Investigation Inspections – #0</p>	
III. Committee Reports A. Practice Committee	Evans, K. Commissioner	<ol style="list-style-type: none"> 1. New Sterile Inspection Report Form is ready for Board approval. <p>Renae Cregger-Southern Pharmacy Services: Our pharmacy is licensed in Maryland . We are going to begin dispensing medications to residents in 3</p>	

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		<p>assisted living facilities in Maryland. Since we are a long term care pharmacy and our services are limited to assisted living facilities, I believe we qualify for an exemption to dispensing to the Maryland Prescription Drug Monitoring Program. Please clarify if that is correct and if the attached application is what is required to obtain the waiver/exemption. Also please clarify if we do not choose to apply for a waiver, then would we just report all dispensing of controlled substances to the Maryland PDMP?</p> <p>Proposed response: Pharmacies that provide services for long- term care and assistant living facilities solely are exempt from reporting to PDMP if they hold a waiver permit issued by the Board. However, the Board does not issue waiver permits to non-resident pharmacies.-Please contact PDMP program for further information and guidance on how to qualify for this exception. Dispensers must report all CDS dispensed to the PDMP.</p> <p>Rob Geddes-Albertsons Companies, Inc - Our system has the capability of sharing workload amongst a group of pharmacies to allow for shared processing of the data entry and data verification step. At the end of the day, it allows a lower volume location to support a higher volume location. As we have reviewed the statutes and regulations it appears this scenario may not be contemplated. Does Maryland allow for shared processing between licensed pharmacies in the state who share a common database and owner?</p> <p>Proposed response: There is nothing that prohibits the shared processing of data entry and data verification between licensed pharmacies in Maryland as long as all licensure, recordkeeping and standards of care requirements are met.</p> <p>Devin Bustin-Ovaryit - I work with a software company that is in contact with some pharmacies in Maryland about creating an Electronic Health Record for pharmacists prescribing contraceptives. I am aware that in order to be prescribed a contraceptive from a certified pharmacist in Maryland that a patient must first fill out the “Maryland Self-Screening Risk Assessment for Birth Control” form. In an effort to streamline the pharmacist workflow, we hope to create an electronic screening tool for our pharmacy partners. To make sure that we are 100% compliant with the</p>	

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		<p>Board of Pharmacies guidelines and the state law, I have a few questions if you don't mind.</p> <ul style="list-style-type: none"> • Can the form be done electronically or does it legally have to be the paper version of the form? • Does the wording of the questions have to be exactly the same as the current form or can it be worded differently as long as all aspects are covered? • Can the answers to the questions be in a medical note format or does it need to follow the check box format of the form to satisfy an audit? <p>Proposed response:</p> <ol style="list-style-type: none"> 1. Yes, this can be done electronically. 2. The wording must be the same as the Board's form. 3. Yes, responses can be documented in medical note format as long as the content remains the same. <p>Angela Morrow- I would like to clarify what is required from a hospice facility when requesting prescriptions to be filled at a pharmacy. The control II order seems to be something that we all agree on. It can be sent via escribed, fax (with a provider's signature) or the original presented.</p> <p>However, we are having conflicts with the other prescriptions. We currently serve a assisted living facility who has some clients in hospice who are managed by the hospice facility. This is the scenario: The RN (or LPN) takes a verbal order from the prescribing practitioner. The nurse faxes the order to the pharmacy. Thus, it is a fax order with no prescriber's signature. Question, is this a legitimate fax prescription if there is no provider's signature? In some cases, there is no duration or qty. Obviously we need to call and confirm that duration. In some cases there are control medications with no quantity, DEA, or again a doctor's signature.</p> <p>Are these valid prescriptions because the patient is enrolled in hospice? Do faxed prescriptions from hospice facilities require a provider's signature or</p>	

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		<p>can the verbal prescriptions to the RN/LPN from prescribing practitioner be faxed to the pharmacy. The pharmacist here at Terrapin are in consensus that the hospice nurse should have to call these orders in has verbal rx's because there is no provider's signature.</p> <p>Note: On the medical order, the nurse does have his/her signature signed next to " acknowledges the order was read back and verified "</p> <p>Proposes response: Faxed prescriptions require the prescriber's signature. The nurse may call in a verbal order if the nurse is acting as the agent of the prescriber in accordance with the DEA.</p> <p>John Broxton - If your doctor writes a prescription and faxes it to the pharmacy. Does anyone other than the doctor who wrote it have the right to call the pharmacy and make changes to the prescription?</p> <p>Proposed response: No, the second prescriber would be required to write a new prescription.</p>	
B. Licensing Committee	K. Rusinko, Chair	<p>1. Review of Pharmacist Applications:</p> <p>a. 126665 - Applicant is requesting an extension of his Board's application until 09/14/201 to match the expiration of his NAPLEX score. <i>Committee recommendation: Deny extension, inform applicant he is welcome to reapply.</i></p> <p>b. 125279 - Applicant would feedback regarding why the law scores are kept private from review of the examinees who take the exam. <i>Committee recommendation: Not under the purview of the MDBOP. Please contact NABP directly.</i></p> <p>c. 123463 - Applicant is requesting the Board's application and eligibility to test is extended.</p>	

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		<p>Pearson Vue was not able to assist with her accommodation requirements and her ATT expired. Committee recommendation: Approve eligibility extension request for 6 months. Applicant must reapply.</p> <p>d. 125098- Applicant is requesting a 3-month extension of his Board's application. Committee recommendation: Deny, please reapply</p> <p>e. 129012 - Reciprocity applicant is inquiring if there is a fee reduction for active-duty pharmacists. Committee recommendation: There is currently no fee reduction for active duty members.</p> <p>f. RMN - Applicant is requesting an extension of his ATT for the NAPLEX exam. He was unable to test due to COVID. Committee recommendation: Approve a 6-month extension</p> <p>g. RT - Licensee is requesting approval of her work experience in order to reinstate her license. Committee recommendation: Would approve hours, will need to meet the application and exam (NAPLEX, MPJE) requirements</p> <p>h. JT - Applicant is requesting a 1-2-month extension of the Board's application. He was uncomfortable with taking the exam prior to becoming vaccinated. Committee recommendation: Approve extension for MPJE eligibility for 6 months. Deny application extension, will need to reapply.</p>	

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		<p>2. Review of Pharmacy Intern Applications:</p> <p>3. Review of Pharmacy Technician Applications:</p> <p>a. 129045 - Applicant is requesting an extension to complete the requirements for his Technician application. Due to the COVID-19 pandemic and the staffing implications of the on-site vaccination clinic, off-site mass vaccination clinic, and other projects ongoing in the pharmacy department, he was unable to complete his Pharmacy Technician University (PTU) assignments. His 6-month grace period will expire on 03/31/2021. <i>Committee recommendation: Approve a 1-month extension from the date of the Board's notification.</i></p> <p>4. Review of Distributor Applications: NONE</p> <p>5. Review of Pharmacy Applications:</p> <p>6. Review of Pharmacy Technicians Training Programs:</p> <p>7. New Business:</p> <p>a. Fagron - Distributor is requesting a temporary waiver of the background check requirement due to COVID concerns/possible exposure. <i>Committee recommendation: Deny</i></p> <p>b. Heather Witt - Inquirer would like to know if she requires a license to perform "chart review" services for Medicare patients at a family practice site.</p>	

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		<p><i>A license is required based on the description of the duties you would be provided.</i></p> <p>c. Tony Michalak - Inquirer would like to know if a permit is required to provide hand sanitizer to a facility located in MD. <i>Committee recommendation: A permit is not required.</i></p> <p>d. VGM - Company is requesting a refund of the application fee of \$1,750. A Distributor permit application, was submitted, however the company's business plan changed and they no longer require the permit. <i>Committee recommendation: Deny</i></p> <p>e. Katie Krueger - Inquirer would like to know if a permit is required for an ambulatory surgery center. Prescriptions will not be dispensed, just administered. <i>Committee recommendation: A permit is not required .A permit with OHCQ may be required.</i></p> <p>f. Bishal Bista - Inquiry requesting guidance on compliance as the satellite pharmacy is being restructured. <i>Committee recommendation: Provide regulation/definition (COMAR 10.34.03.02. B1) of a decentralized pharmacy</i></p> <p>g. Carol Gregg - Inquirer would like guidance on becoming a "specialty pharmacy". She was provided the Waiver application.</p>	
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		<p><i>Committee recommendation: There is no designation for a specialty pharmacy. Provide the definition of a Waiver pharmacy.</i></p> <p>h. Stephanie Sebastian - Permit holder is requesting guidance on what to do when the Md licensed pharmacist goes on maternity leave. <i>Committee recommendation: The Board's permit does not need to be relinquished.</i></p> <p>i. Najah Gilliam– Does a student with a MD Cannabis Card have to take a drug test? When she does take the drug test, will she be penalized for the potentially positive results? <i>Committee recommendation: The Board has no position on drug testing, that is up to your institution.</i></p> <p>j. Smith and Nephew - Distributor is requesting approval for Tennessee to be deemed a reciprocal state. <i>Committee recommendation: Approve TN as a reciprocal state</i></p> <p>k. Reliance Wholesale - Company is requesting the Board approve the use of the Florida Board of Pharmacy inspection report for their TN location. FL is a reciprocal state which inspected the company's TN location. <i>Committee recommendation: Provide proof facility is not located in a residence. TN has tentative approval as a reciprocal state</i></p>	

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C. Public Relations Committee	E. Yankellow, Chair	Public Relations Committee Update:	
D. Disciplinary	J. Hardesty, Chair	Disciplinary Committee Update	
E. Emergency Preparedness Task Force	N. Leikach, Chair	Emergency Preparedness Task Force Update	
IV. Other Business & FYI	K. Morgan, President		
V. Adjournment	K. Morgan, President	A. The Public Meeting was adjourned. B. K. Morgan convened a Closed Public Session to conduct a medical review committee evaluation of confidential applications. C. The Closed Public Session was adjourned. Immediately thereafter, K. Morgan convened an Administrative Session for purposes of discussing confidential disciplinary cases.	

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		D. With the exception of cases requiring recusals, the Board members present at the Public Meeting continued to participate in the Closed Public Session and the Administrative Session.	